

**CASTLE MEDICAL CENTER****CC:** DAVID A KUCHENBECKER, MD**DATE OF OPERATION:** 07/30/2003**PREOPERATIVE DIAGNOSIS:** LEFT RENAL CALCULI.**POSTOPERATIVE DIAGNOSIS:** SAME.**SURGEON:** DAVID A KUCHENBECKER, MD**ASSISTANT SURGEON:** NONE.**ANESTHESIOLOGIST:** Dr. David Kuchenbecker**ANESTHESIA:** Intravenous sedation**OPERATIVE PROCEDURE:** EXTRACORPOREAL SHOCKWAVE LITHOTRIPSY  
WITH FLUOROSCOPIC LOCALIZATION,  
ADMINISTRATION OF INTRAVENOUS CONTRAST.**INDICATIONS FOR PROCEDURE:**

The patient is a 39 - year old recurring stone former who presents with intermittent left colic, discovered to have a 4 x 5 mm calculi in the lower left calix.

**DESCRIPTION OF OPERATION:**

The patient was premedicated with 10 mg morphine sulfate and 25 mg of Phenergan prior to being transferred to the lithotripsy suite. He was placed on the table in the supine position. The treatment head was elevated. Fine tuning adjustments were made. Because the stone was a lucent variety, intravenous contrast was administered utilizing 50 ml of Omnipaque. Treatment was focused on the lower pole calix where the stone was known to be present on the previous CT imaging. After the contrast appeared in the kidney, the treatment was begun per protocol with a KV of 0.1 and gradually increased to a maximum of 3.5. Intermittent fluoroscopy was performed, assuring the stone complex has stayed at the F-2 focal area. A total of 1.5 minutes of fluoroscopy time were utilized in addition to two snapshot images. A total of 5000 shocks were administered to the stone.

**Castle Medical Center**

640 Ulukahiki Street  
Kailua, Hawaii 96734  
(808) 263-5500

**OPERATIVE REPORT**

PATIENT: AHOLELEI, STAR V  
MR #: 18-91-20  
ATT PHYS: DAVID A KUCHENBECKER, MD  
DATE: 07/30/2003  
ROOM:

ORIGINAL IntelliType Transcription Page 1 Of 2

085

## CASTLE MEDICAL CENTER

The patient received 2.5 mg Versed and 125 mcg of Fentanyl for sedative purposes. The patient tolerated the procedure well. There were no intra or perioperative complications. The patient remained stable throughout the operative procedure and on return to the recovery area.

DAK/ITMS/rld J10309 - 110435

D:08/01/2003 08:30:00

T:08/01/2003 11:44:16

Charted:

DAVID A KUCHENBECKER, MD



**Castle Medical Center**  
640 Ulukahiki Street  
Kailua, Hawaii 96734  
(808) 263-5500

**OPERATIVE REPORT**

PATIENT: AHOLELEI, STAR V  
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ROOM:

ORIGINAL IntelliType Transcription Page 2 Of 2



086

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY

## MULTIDISCIPLINARY PROGRESS NOTES

NAME S. holelei, StarSSN DOB 

DATE	TIME	PLAN
7/29/03	2215	Dr. Kuchenbecker's consult retd for MD review. a/c 7-29-03 2215
7/30/03	1730	Visited & spoke briefly with Dr. Kuchenbecker / T. C. 7-30-03 1730

8/27/03	<ul style="list-style-type: none"> <li>3) Pt still continues to have <del>difficulty</del> difficulty with lights (L); also <del>difficulty</del> difficulty with memory</li> <li>2) Pt appeared to be in some discomfort. Review Dr. Kuchenbecker's 7/30/03 notes.</li> <li>1) Review notes, in detail.</li> <li>2) Continue to tx &amp; monitor pt.</li> <li>note to 2) Nursing staff to verify w/ Dr. Kuchenbecker's office regarding pt's next follow up</li> </ul> <p>T.C.</p>
	<p><u>Addendum:</u></p> <ul style="list-style-type: none"> <li>3) Pt's sinus problem aggravated by drinking water per Dr. Kuchenbecker's recommendation.</li> <li>2) Vocal quality to worse voice; Oral dysphagia is</li> </ul>



STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY

NAME Aholelei, Star

SSN

DOB

DATE	TIME	PLAN
10/13		Close Air + 1 Cholesterol
		<del>J. C. C. 10/1/03</del> 10/1/03 515
10/3/03	1328	- see inmate my report — morning
10/10/03		Transfer to Hospital
		<del>200</del> 10/6/03 10/10/03 200 J. C. C. 10/6/03

11/11/03	1430	<p>S: (R) waist foreign object - possible + (R) kidney pain from kidney stone.</p> <p>D: Pt. requested check to Dr. Kuechen peger at Castle Inc. for his kidney pain. Mother 800 mg. grm for pain.</p> <p>P: Smiled &amp; happy to be alive. Resting in bed listening to music.</p> <p>A: A little in comfort.</p> <p>P: TCT Dr. A. MD to Wal (R) waist tomorrow. ✓ Theresa on spot for outside MD tomorrow. Continue to monitor C. Dease, RD</p>
11/11/03	1800	<p>S: "Sometimes I have hard time breathing. I have bronchitis. They took X-ray of my chest."</p> <p>O: Inmate c/o SOB - inmate to unlabored respiration RR 16-18 on assessment. Lungs CTA. Occasional dry cough. ate meals 100%o. Up ad lib in the infir</p> <p>A: Alteration in comfort.</p> <p>P: Continue to current plan of care. Medications administered as ordered. - D. Kuechen, RD</p>
		NOV. 12, 2003 WEDNESDAY
11/12/03	0330	IM slept throughout the night. Respirations regular & unlabored. Hourly checks done.
11/12/03	1815	<p>S: Will the doctor see me today?</p> <p>O: Informed inmate that MD will not be able to see him today. Informed him that he will have nothing by mouth to midnight tonight due to procedure on the (L) waist tomorrow. Verbalized after finding.</p> <p>A: PO x 3. Up ad lib inside his cell.</p> <p>A: Stable.</p> <p>P: Cont. to current plan of care. - D. Kuechen, RD</p>
		NOV. 13, 2003 THURSDAY
11-13-03	0500	<p>IM slept throughout the night. No complaints. Was instructed to be NPO 5 midnight. IM has not ate or drank anything on my shift. V/S. Respirations regular &amp; unlabored. Hourly checks done. C. Dease, RD</p>

STATE OF HAWAII  
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## INFIRMARY PROGRESS NOTES

NAME Aholelei, StarSSN DOB 

DATE	TIME	PLAN
11/19/03	2130	<p>9: Bilateral kidney pain</p> <p>O: Motrin 800 mg PO C. 1715 given. Pt. smiling &amp; feeling O.K. Complaints re: jaw or (D) wrist setting too dark, listening to music.</p> <p>A: Alt in comfort</p> <p>P: Continue to monitor. C. Ibuprofen</p> <p>NOV. 20, 2003 THURSDAY</p>
11-20-03	0545	<p>IM slept throughout the night. Respirations regular &amp; unlabored. Hourly checks done.</p> <p>Administered IM AM medz @ 0540 due to going to court. Will be going to intake @ 0600.</p>
11-20-03	1420	<p><del>1420</del> <sup>for</sup> Pt. left cell before a.m. shift started. <sup>for Napa LPN</sup></p> <p>Pt has not returned to infirmary. C. Ibuprofen</p>
11-20-03	1600	<p>4: "I'm O.K."</p> <p>O: A: O &amp; 3, IN NDS.</p> <p>A: STABLE</p> <p>P: Monitor — <sup>de-Melissa</sup></p>
	1900	<p>PT ARE WEAK. REQUESTED FOR SOLID FOODS GOING BACK TO COURT TOMORROW.</p> <p>Stomach size (L) unit handling well.</p> <p>OPCIE INTACT. DRESS APPLIED &amp; SEE UNDRESS</p>
	2200	<p>Sleeping — <sup>N. Melinda, RN</sup></p>
		<p>NOV. 21, 2003 FRIDAY</p>
11-21-03	0430	<p>IM slept throughout the night. O complaints.</p> <p>Respirations regular &amp; unlabored. Hourly checks done. IM will be going to court today @ 0600. Will administer AM medz prior to movement.</p>
11/21/03	2100	<p>5- The Complaint:</p> <p>O: <sup>Amelia RN</sup></p>

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY

## MULTIDISCIPLINARY PROGRESS NOTES

NAME: Aholelei, Star

SSN: \_\_\_\_\_

DOB: \_\_\_\_\_

DATE	TIME	MD CLINIC/DR. <u>Padees</u>
01/3/04		WT: <u>191#</u> HT: <u>5'8"</u> BP <u>120/72</u> R: <u>20</u> P: <u>76</u> T: <u>98</u>
		multiple 90 headache, flashes & Migraine pain, requesting small dose to w/ head
1/3/04		2) Pt % squeezing headache $\geq 1\text{hr}$ , regularly & also intermittent visual flushing @ anytime, $\geq 15\text{ minutes long}$ 0) Pt is OBN; obviously had last night; withm, cuts now $\equiv$ difficulty. Pain along low thalamic & brainstem $\equiv$ 枕骨 A) 1) Headache, tension, doubt migraine) Back pain, aching 2) Visual disturbance; & u/gastro, diffuse P) 1) Motrin <u>800 mg</u> i.v. to grid X & Bush (one #60). <u>on help pain</u> . 2) Flexoril, <u>10 mg</u> qH x 4 tabs. 3) H2 snad X Bush. 4) Naclot <u>1 g</u> mesh X Bush. To sheet. 5) Bush brace X Bush <u>will come protection now</u>
1/3/04		Noted 01/3/04 <u>in 7/30</u>
01/3/04	1130	MDO Renewal: Sched. 1cc <u>1/1/04</u> Glucophage <u>850 mg</u> po TID X 3 Alloprimol <u>300 mg</u> po od X 1 month Singulair <u>10 mg</u> po 6 AM Noted <u>in 01/10/04 1130</u> <u>to Dr. Padees</u> <u>7/30</u>

STATE OF HAWAII  
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MULTIDISCIPLINARY PROGRESS NOTES

NAME Apalaelei Star  
SSN   
DOB

DATE	TIME	PLAN
3/4/04	0730	<p>SA spoke briefly before going to outside doctors appointment verbiage concern about 3/2/04. Said MKF wants to see a health provider.</p> <p>Will refer to Dr Patel. He will see IM on Thursday. Claim was DC done to C/P side effects IM has been having multiple A/P Will refer to NP</p> <p>PPs</p>
3/5/04	chart review	<p>SA referred to see Dr Padares or me</p> <p>3/5/04 SA 3/5/04 3/5/04</p>

DATE	TIME	PLAN
03/12/04	082	MD CLINIC/DR.
		WT: 194 HT: 5'8" BP 124 180
		R: 18 P: 84 Temp: 97.6
		<p>Do of "icing flocks". Big light see before eyes about 2x1aw. Last about an hr. Feel "real sick" when it occurs. Can see things around them but this (g flock of light blocks) vision. Occurs at no particular time.</p>
		<p>Body aches - all over body, but mainly spine and head. Takes Tylenol + helps a little. Plus needs the Flexeril and relaxes the muscles.</p>
		<p>Sinus drizzling and getting worse. Takes (1) in am + (1) at night. Does he need more than that.</p>
		<p>O. Alert male NAD:</p> <p>Cr reg</p> <p>Lungs clear</p> <p>abd - soft (+) BS</p> <p>ENT xD grossly intact</p>
		<p>Sinus - non tender. No runny nose. Nares patent + clear, no erythema.</p>
		<p>Back - tender on palpation of spine</p>
		<p>PTR - brisk.</p>
		<p>SLR - negative.</p>
		<p>A. visual disturbance - Ophthalmology exam 3/4/04 NH.</p>
		<p>Body aches - in Morning - only claims taking 2 tabs 2x/day on late tab (Qd).</p>
		<p>Sinus - no objective findings.</p>
		<p>T-</p>

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY

NAME Cholatse, Stan

## MULTIDISCIPLINARY PROGRESS NOTES

absolute; star

DATE	TIME	PLAN
3/30/04		add /Tasotec 5mg i po bid x 3 months - with MOTED 3/10/04 JW
4/5/04	0915	pt requesting renewal for motion. will discuss w/ MD. MDD: motion 800mg i tab up to QID x 6 wks issue #30 T.O. M. padusse / ymca
4/6/04	1650	MOTED 4/15/04 ymca 0915 24 ✓ 4/15/04 1530 am Order: MOTED (1) Do full CMP, PT / INR. 2) Inquiries to Theresa if pt scheduled to Follow up to urologist. 3) Flexible 10g to get own bath gown wk (med to be O/Wake admin). 4) x 30 days per Dr. Padusse / P S
4/13/04		noted 4/15/04 ymca 0930
4/23/04		HS snack denied copay N/A NOTED as 4/23/04

DATE	TIME	PLAN
5-17-04	1215	MONA BENTON FLOVENT MDI ONE PUFF BID X 90 Days
5-18-04	1215	SINUAIR 10mg TAB ONE PO X 90 Days QD
5-19-04	1215	ALUPURINOL 300mg ONE PO QD X 90 Days
5-19-04	1600	1000 mg T.O. DeBuman Open
5-18-04	0930	SODIUM BICARB. 650mg - 2 TABS TID PO X 90 Days T.O. DeBuman Open
5-24-04	0700	Side coll. st. cl. rash to left arm - nonurticative present. Give 1 cup & PON use - Halls
5-26-04	0900	500 mg SHOT
		q-f Aspirin 81mg po qd x 3 mo profile Loratadine 5mg po BID x 3 mo O/C Lipitor 20mg 1/2 tab Sodium Bicarb 650mg 1/2 po qd x 3 mo Allopurinol 300mg po qd x 3 mo. Glucophage 80mg TID x 3 mo profile Glypizide 100mg po qd x 3 mo
	1000	OTAC 80mg 1 puff QID x 3 mo Inhaler 1/2 puff QID pm x 3 mo Singular 100mg po qd x 3 mo.
		1/2 mg 1/2 po TID pm x 3 mo profile. 200 mg ADL + chole + fat x 3 mo Gentoo schedule & doses H: cholesterol diabetic tracking.
		LAB SLP 04/04 U/A, LFT'S, Hep C antibodies, uric acid. Please take him back to see if needs a new brace. If he does he needs to order it.
		8-27-04 - Flu in 3 mo old Open
		6-8-04 flu in Dr Padua's Kidney pains + numbness feet. Open
5-30-04	1100	see injury report

COPY  
Facility

RTC

Chronic Care Clinic  
Follow-up VisitName AHOLELAI, SAE Sex 4SSN Allergies 

Diagnosis

Tests needed prior to visit

Vasotec 5mg po Bid  
Lipitor 20mg 1 tab poqdmetformin 800mg qamASA 81mg po qdSodium Bicarb 650mg 1/2 po TIDAllopurinol 300mg po qd OTC 4mg t TID pm

Current Medications

Glucophage 850mg TIDGlipizide 10mg q amOVAL 80mg 1 puff Bid, Albuterol inhaler 1/2 puff qid pmSingular 10mg po qd

Diet

2000 cal ADA School fat

Special Needs

Peak flow - 650  
850, 850

## SUBJECTIVE DATA

Complaints/Comments

occ at night & subaging. Rarely uses inhaler.clawing numbness of ft or leg off & on, saysnumbness radiates from top of leg to toes.

Review of Symptoms

clawing bleed in urine & Kidney pain.evants a new back brace, says it is "falling apart".wants to start on DYM diet. says

Compliance with medications:

 YN she will not refuse it.

Effectiveness of medications

## OBJECTIVE DATA

Vital Signs: Ht. 5'8" Wt. 201# B/P 110/80 P 80 R 18 T 97.7

Skin ✓ intact, scattered areas of hyperpigmented skin

HEENT ✓ patent nares, no rhinorrhea

Heart ✓ no brug

Lungs clear, no wheeze

Extremities (-) edema, pulse to leg intact, leg is warm.

Other

Evaluation of labs, tests, treatments, consults

## ASSESSMENT

DOC XXX

**COPY**

Type II DM. Good control.

Asthma - stable.

Chronic sinusitis PND

multiple (4) ureteral calculi,

Tinea versicolor - skin arms

LFT's ↑.

**PLAN**

Medications

See front sheet

Good!

Labs Glucose 98 4/04 Chol 175 &gt; 3/04 Hgb A1c (5.7)

BUN 19 Cr 1.41 4/04 LDH 1081

Treatments 360T 521 > 4/04 Step e antidi 3/04 -  
560T 100 > 4/04

Consults

Diet

Special Needs

Other Exercise - walk in quad 10 x 2-3 x/wk.

Optometry 3/04 &amp; Diabetic Retinopathy.

**EDUCATION AND COUNSELING**See progress notes for  
plan e goals

✓

Noted by Hawn P  
2/28/04

Return to Clinic 90 days

Other

Signature/Title Ozon NO

Update: Problem sheet

HSCR

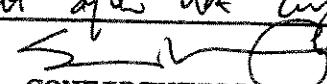
Date 5/28/04

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY  
MULTIDISCIPLINARY PROGRESS NOTES

NAME Aholelei, Star

SSN

DOB

DATE	TIME	PLAN
6/3/04		(Planned): K/M: check x-ray film scheduled P/M: estimate 7/04. (See consult 3/04 Dysthymy) C/S: schedule to Dr. Padilla for continuing B/M: kidney pains & need for Flu & Dr. Kuchenbauer. P/M: fit At Domino's AAA Bio x 1 mo \$15/gms no drugs. (Oxygen)
6/8/04	MD CLINIC/DR. DR. PADILLA	WT: 197# HT: 5'8" BP 110 / 80 R: 18 P: 96 T: 93° ③ Flasher in vision (Unilateral) $\geq$ 80ms about 2X/wh; also numbness on ② side of head / chin; no other symptoms; "spark" in mid lumbosacral area & radiating to base of chin then numb on ③ side of head & neck (chin & also lower jaw); states passed out but unclear at this time (no injury reported). ④ Pt in LAD site $\geq$ 10 min uses, with 3 difficulty, ⑤ CVA L $\rightarrow$ R a possibility! PERZEL; vision intact. Review medical record with pt. ⑥ ① Cluster headache? ② ④ ⑤ CVA pt in possible renal area. ⑦ ⑧ ⑨ LAD (send specimen) general specimen (4B 5cgtg Lab) (6-8-04) ⑩ Unities 25 mg q 4 hr pm Cluster Cluster (1230) ⑪ Headache up to 9 in 24hr x 4 week. ⑫ Will consider Neurology consult if Unities not well. ⑬ Will refer to Urology consult after UA completed.
DOC 0413 (06/92)	noted 4/10/04 or 1440	 CONFIDENTIAL

## LABORATORY REPORT

PUBLIC SAFETY-HALAWA C.  
RE: PSD CLNT HCD-15  
99-902 MOANALUA HWY.  
AIEA, HI 96701

DIAGNOSTIC  
LABORATORY  
SERVICES, INC.

650 IWILEI ROAD, SUITE 300  
HONOLU 96701  
DATE OF BIRTH JEX M

AHOLEILEI, STAR  
DR. PATERSON, SISAR  
HOSP #: A0146949

PT. TEL# 0

06/09/2004	06/09/2004	06/09/2004	55334799
DATE COLLECTED	DATE RECEIVED	DATE REPORTED	ACCESSION NUMBER
TESTS	RESULTS		REFERENCE VALUES

## Urinalysis - Complete

Color	YELLOW	
Appearance	CLEAR	
Specific Gravity	1.025	1.005-1.030
pH	6.0	5-7.5
Protein	TRACE	NEGATIVE
Glucose	NEG	NEGATIVE
Ketones	NEG	NEGATIVE
Urobilinogen	0.2	0.1-1.0
Bile Pigments	NEG	NEGATIVE
Blood	TRACE	NEGATIVE
Leukocyte Esterase	NEG	NEGATIVE
Nitrite	NEG	NEGATIVE
Microscopic		

5-20 RBC/HPP

Oxyte schedule to urology await.

noted by *Werner* 5/14/04

5/14/04 AHOLEILEI, STAR

\*\*\* FINAL REPORT \*\*\*

24/ 6/16/04 1000

261-4884

## CONSULTATION RECORD

HCF

Facility

S.I.D.

Abdullah Star

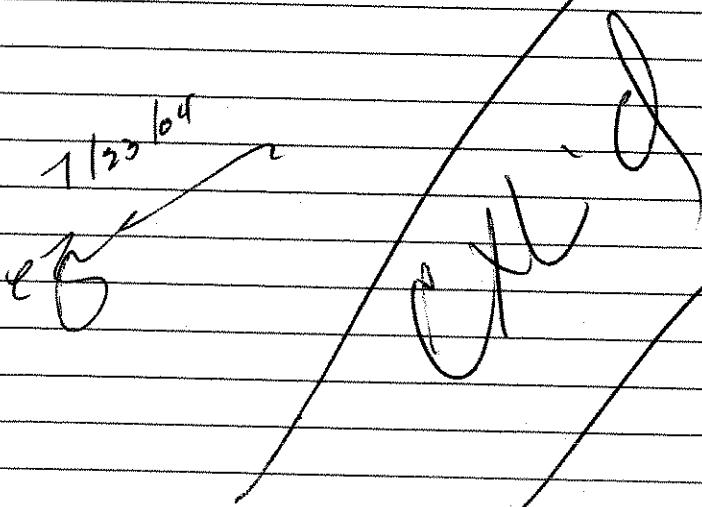
Name	Last	First	Initial	DOB	SSN
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REQUEST TO:	urology Dr. Kuchenbaker	DATE OF APPOINTMENT:	7-9-04	TIME:	1145
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REASON FOR CONSULTATION:

7/4 kidney painDate 6/15/04Requesting Physician Dr. Padus M.D.

## CONSULTANT'S REPORT (HISTORY, FINDINGS, DIAGNOSIS, RECOMMENDATIONS)



1/23/04  
eG

The handwritten text '1/23/04' is at the top left. Below it, the letters 'eG' are written. To the right, there is a large, stylized, handwritten mark that appears to be a signature or a large initial. The rest of the page is filled with several horizontal lines for writing a report.

M.D.

Consultant's Signature

\*Complete Form Doc 0497 if a significant change in health status has occurred.

Original: HCU

Yellow: Consultant's Copy

DOC 0406 (11/97)

CONFIDENTIAL

CONSULTATION RECORDHCF  
Facility:

SUD:

Patient Name:

Last Ashley Star

First

Initial

DVD

Consultant

Castle Radiology

Appointment Date

6-29-04

Appointment Time

0730

REASON FOR CONSULTATION (Complete Form Doc 0497 if a significant change in health status has occurred):

Plain CT - Kidney stonesPadres Int6/28/04

Name of Requesting Physician

Date

## CONSULTANT'S REPORT (Findings, Diagnosis, Recommendations)

as done 0800 hrs 6/28/04 apNo report yet at this time7/6/04 10:00 AM10:00 AM

Consultant's Signature

Date

45 Code of Federal Regulation 164.512.(k)(5): A covered entity may disclose to a correctional institution or a law enforcement official having lawful custody of an inmate...protected health information about such inmate if the correctional institution or such law enforcement official represents that such protected health information is necessary for: ...d) the health and safety of such individuals and officers or other persons responsible for the transportation of inmates or their transfer from one institution, facility, or setting to another:...For the purposes of this provision, an individual is no longer an inmate when released on parole, probation, supervised release or otherwise is no longer in lawful custody.

Original: Medical Record

Canary: Consultant's Copy

DOC 0406 (12/03)

CONFIDENTIAL

**Adventist  
Health CASTLE MEDICAL CENTER****Radiology Report**

Imaging Services Department  
640 Ulukahiki Street  
Kailua, HI 96734-4498

**Patient: AHOLELEI, STAR V.**

Med Rec #: 18-91-20  
Account/ Seq #: 43472141 / 1  
Patient Type: O/O  
DOB: Age: 040Y Sex: M

Ordering MD: KUCHENBECKER, DAVID A  
Attending MD: KUCHENBECKER, DAVID A  
Referring MD:  
Radiologist: Chuong Nguyen, M.D.

Exam Date / Description: 6/29/2004 CT ABDOMEN W/C CONTRAST

Reason for Exam: KIDNEY STONES

Transcribed Date / Time: 6/29/2004 9:36:11

Transcribed by: CHARLIE DASPRIT

Report Verified by: Chuong Nguyen, M.D.

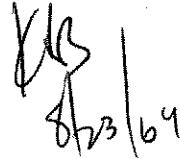
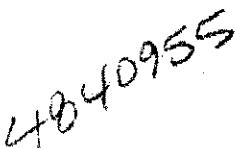
**Report**

CT Urogram is performed without oral or intravenous contrast.

A 6 mm stone is seen in the right lower kidney, nonobstructive. A few small parapelvic cysts are seen in the left kidney measuring up to 1.5 cm in size. No left kidney stones are seen. There is no hydronephrosis or hydroureter. The bladder is unremarkable.

**Impression**

A 6 MM STONE IN THE RIGHT LOWER KIDNEY, NONOBSTRUCTIVE.

**End of Report**

# Fax

30 AULIKE STREET, SUITE 602  
KAILUA, HAWAII 96734  
(808) 261-4884 OFFICE  
(808) 261-4835 FAX

To: Medical Unit/Dr. Paderas From: D Kuchubucker  
Fax: 484 0955 Pages: 2c longer  
Phone: Re: Star Anolele Date: JUN 30 2004  
CC:

Urgent  For Review  Please Comment  Please Reply  Please Recycle

Comments: Will cancel appt. 7-9-04 not necessary for pt. to be seen at this time.

*m*

*7/13/04*  
*LB*

**FILE**

**IMPORTANT NOTICE:** This message is intended only for the use of the individual or entity to which it is addressed. It may contain information that is privileged, confidential, and exempt from disclosure under law. If the reader of this message is not the intended recipient, or the employee, or agent responsible for delivering the message to the intended recipient, you are notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify Immediate telephone, and return the original message to us at the above address via U.S. mail. Thank You

DATE	TIME	PLAN
7/23/06	0830	
		MD CLINIC/DR. <u>Cyan</u>
		WT: <u>196</u> HT: <u>5' 8</u> BP <u>122 / 90</u>
		HR <u>18</u> P: <u>98</u> 7984
		1M 0 multiple complaints to discuss <u>1. Pain</u>
		Sparks on spine & see it in my eyes. See flashes in eyes. Makes (L) side of head "numb" or 1 <sup>o</sup> . Lay on bed. Occurring 2-3 x/wk. Causes him to be confused & forgetful.
		Not in kitchen (not stomach because he has no snack). So not taking Motrin at night. Would take it at 8pm & dinner because wants to space it out. Jaw (numb) was told by Dr. Strachan that it might not get better.
		Kidney - stone painful. That's why he gave me a snack. (CT scan done 6/29/06)
		O. insert in male NAD appears ir regular. very anxious. Strong. Lungs: clear. firm muscles arms legs - chest.
		Abd - soft (+) BS NT, no organomegaly pads. Mild tenderness lower back
		SLR - negative DTR 2+ bilaterally
		HEENT - negative
		Neck - supple, no adenopathy
		Ext - 5 edema, cyanosis good skin
		Neurologic - motor & sensory intact
		A. Flashes of light in eyes. Stomach upset p Motrin.
		(L) lower jaw numbness ent

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY

NAME Cholese, Star

33N

DOE

DATE	TIME	PLAN
7/23/04	cont	<p>Kidney stone pain</p> <p>1. Consult Dr. Shabotka for kidney stone</p> <p>2. Schedule a Dr. Shabotka appointment for 7/26/04</p> <p>3. Consult Dr. Kuchanlata for anxiety CT results</p> <p>4. Done 6/29/04. Please see this (need report). Going to Dr. Kuchanlata 1330 E day.</p> <p>5. Schedule a Dr. Shabotka appointment for 7/26/04</p> <p>6. Schedule to see Psychiatry (anxiety) 7/26/04</p> <p>7. Noted by Gparmar 7/23/04</p>

HCPCONSULTATION RECORD

Facility:

Aholelei, Star

S.I.D.

Patient Name: Last

Dr. Kuchenbecker

First

Initial

JULY 23, 2004

DOB

Consultant

Appointment Date

1130

Appointment Time

REASON FOR CONSULTATION (Complete Form Doc 0497 if a significant change in health status has occurred):  
P/U kidney pain

Dr. Padres

7-23-04

Name of Requesting Physician

Date

## CONSULTANT'S REPORT (Findings, Diagnosis, Recommendations)

40 yrs ♂ - recent renal colic

Present 10/04 with midol stone, see consult sheet attached  
S/P retrogr + LASER - ESL 7/03Stone Analysis, 11/02 = 100% C<sup>+</sup> & O<sup>+</sup> mostly labSF tremendous pain R side, some on Right - All the time  
(+ Blood in尿) Constant & Meds  
I had the kidney Nausea/ Feverish

CT - 6mm stone lower pole right kidney - not obstructing

Englared to get - R stone cannot explain R sided pain  
need to reevaluate for die/ body problem to indicate  
Consider ESL of R stone - \$ trial Renal Sc  
Urology SV

Consultant's Signature

Date

7-23-04

45 Code of Federal Regulation 164.512(k)(5): A covered entity may disclose to a correctional institution or a law enforcement official having lawful custody of an inmate...protected health information about such inmate if the correctional institution or such law enforcement official represents that such proteted health information is necessary for: ...d) the health and safety of such individuals and officers or other persons responsible for the transportation of inmates or their transfer from one institution, facility, or setting to another:...For the purposes of this provision, an individual is no longer an inmate when released on parole, probation, supervised release or otherwise is no longer in lawful custody.

Original: Medical Record  
Canary: Consultant's Copy

DOC 0406 (12/03)

8/16/04 hold on lithotripsy @ this time.  
noted 9/1/04

CONFIDENTIAL

Brennan

## LABORATORY REPORT

DIAGNOSTIC  
LABORATORY  
SERVICES, INC.

CLIENT  
PUBLIC SAFETY-HALAWA C.P.  
RE: PSD 02-HCD-15  
99-902 MOANALUA HWY.  
AIEA, HI 96701

650 IWILEI ROAD, SUITE 300  
HONOLULU, HI 96817 • TELEPHONE 589-5100

DATE OF BIRTH

SEX

## PATIENT INFORMATION

AHOLEILEI, STAR  
DR. YUEN, C NP  
HOSP #: A0146949

M

PT. TEL# 0

DATE COLLECTED	DATE RECEIVED	DATE REPORTED	ACCESSION NUMBER
08/18/2004 06:30	08/18/2004	08/19/2004 03:12	58573417 PAGE 1

## TESTS

## RESULTS

## REFERENCE VALUES

Uric Acid

5.3

mg/dL

3.5-7.0

Hepatitis C Ab

NEGATIVE

NEGATIVE

Urinalysis - Complete

Color

YELLOW

Appearance

CLEAR

Specific Gravity

&gt;=1.030H

1.005-1.030

pH

6.0

5-7.5

Protein

NEG

NEGATIVE

Glucose

NEG

NEGATIVE

Ketones

NEG

NEGATIVE

Urobilinogen

0.2

NEGATIVE

Bile Pigments

NEG

NEGATIVE

Blood

NEG

NEGATIVE

Leukocyte Esterase

NEG

NEGATIVE

Nitrite

NEG

NEGATIVE

Microscopic

0-2 WBC/HPF

0-2 RBC/HPF

## Hepatic Function Profile

SGOT (AST)

62 H

0-37

SGPT (ALT)

119H

0-40

Alkaline Phosphatase

IU/L

33-130

Bilirubin, Total

mg/dL

0.2-1.5

1.4

mg/dL

0.0-0.3

Bilirubin, Direct

g/dL

6.2-8.2

0.2

g/dL

7.7

Total Protein

g/dL

3.4-5.0

Total Protein normal reference range has been  
adjusted effective 06/28/04.

Albumin

4.0

g/dL

Bilirubin, Indirect

1.2

mg/dL

0-1.3

AHOLEILEI, STAR

\*\*\* FINAL REPORT \*\*\*

(B 8/31/04)

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY  
MULTIDISCIPLINARY PROGRESS NOTES

NAME Aholelei, StarSSN  DOB  

DATE	TIME	PLAN
9/7/04	1120	ED CLINIC/DR. DR. R. Gonzalez
		WT: 205 HT: 5'3 BP 130/88
		R: 18 P: 98 T 86
		multiple complaints kidney pain, hematuria ab pain from being assaulted. Plaintiff states has "spots" blistery out w/ "black" reveal feels, was seen by nursing M.R.I. was white mother changes, possible M.S.
		did not vomit today.
		revised multiple reports of ABP CT / M.R.I. Brain.
		PT complains of CT pain but has CT kidney stone(?) last OA O
①		→ M.R.I. Brain - needs P/S with nursing + ECG report please schedule nursing PT include M.R.I./ECG studies determining of process.
②		Revol Citalopram a new disketting stone amm. should pass for urine doing all OA normal
③		CT rib pain → say movable mass (spur) healing w/ fx. by MAR include 50mg i/p Bid x 1 month

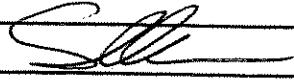
STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETY

## MULTIDISCIPLINARY PROGRESS NOTES

NAME Aholelei, Star

SSN

DOB

DATE	TIME	PLAN
11-28-04	1830	While distributing meds, he presented more $\approx$ 3 empty blister packs stating "I need more of these". I informed him that I need back at it. The 1 <sup>st</sup> Blister pack Alloperine 30mg tabs returned - checking the MAR a blister pack of 30 tabs was given to him 11-19-04. The 2 <sup>nd</sup> medication Chlorpheniramine 4mg tabs returned - a full blister pack of 30 tabs was given 11-21-04. 3 <sup>rd</sup> medication Singlet 10mg, a full (30 tabs) blister pack was given to him 11-16-04. Will refer matter to my Par review. Right now
11/29/04	1030 AM	C.R. indicates now specific MAR changes will follow prescribed regime MAR is 1 yr. no need for w/ dr. Name P Vitals same.
NOTED 11/29/04		 Dr. Salvatore Abbruzzese
12/3/04		MD CLINIC/DR. C. Fuer, NP WT: 202* HT: 5'8" BP: 1 R: 16 P: 72 Temp: 98.6 1130AM: Complaint of diffuse pain on spine & back spot on right & numbness (L) side of head. (Doc 2-3 x last). Causes him to be confused & forgetful. Still a kidney stone pain. Takes Motrin. Exercise - walking. Can't walk up & down stairs. No other exercise!
		cont

DATE	TIME	PLAN
1/2/3	04	cont
		A. See chronic care sheet (D) refer NP
1/10/4	1235	1m w/a middle floor bldg seen in wings counter at the little kitchen 5 am. discomfort. 1pm ref
01/13/5	1930	S: "I still get pain's & aches." — D: IM seen at HS med pass & S/S of dizziness, gait steady. A=ox3, took HS meds & difficulty. P/10 aches and pains "lower", says NP Yuan wrote a prescription for "650 mg" of "Motrin". No such order noted. Given 1 blister pack of motrin 200mg. — A: pain P: disposition stable, instructed on use of motrin and told to bring concerns to MD/NP@ next appt. — /MAY/15
1/16/05	0720	SICK CALL S/D: MRF- have fever, body ache, headache. pt C/O body aches & fever, C/O also cold s/s. pt afebrile @ this time. A: rest in comfort P: motrin 200mg blisterpack given & instructions Encouraged to ↑ fluid intake. RTC prn - ymnl
1/11/05	0720	SICK CALL S/D: MRF- wrist is hurting & I need to see the doctor for my wrist. (pt C/O (R) wrist pain, S/s foreign body removed 11/03. minimal swelling noted to (R) wrist area & bleeding or redness, ROM good, CMS intact. pt asking for ace wrap for wrist A: rest in comfort P: ace wrap given. RTC prn — /MAY/15

**COPY**

Facility \_\_\_\_\_

RTC \_\_\_\_\_

**Chronic Care Clinic**  
**Follow-up Visit**
Name Aholelei, Star

Sex \_\_\_\_\_

SSN \_\_\_\_\_

Allergies \_\_\_\_\_

Diagnosis

NIDDM, gout;

Tests needed prior to visit

asthma

Current Medications

① Ofelexil 10mg po QHS prn ② indocin 50mg i po BID  
 ③ Flomax 0.4mg po QHS ④ glucophage 850mg po TID ⑤ glipizide 10mg  
 ⑥ singulair 10mg po QD ⑦ Cim 4mg po TID ⑧ vasotec 5mg po BID  
 ⑨ imitrex 25mg i & hr prn HA up to 9/24 ⑩ sodium bicarb 650mg ii TID  
 ⑪ allopurinol 300mg po QD ⑫ ASA 81mg po QD ⑬ vit A 50000 unit cream AM QD  
 Diet ⑭ potato products HS snack - milk & fruits

Special Needs

**SUBJECTIVE DATA**

Complaints/Comments

See progress notes

Review of Symptoms

Compliance with medications: Y N NA

Effectiveness of medications

**OBJECTIVE DATA**PEN 580-670-630Vital Signs: Ht. 5'8" Wt. 202 B/P 120/70 P 88 R 20 T 96.8Skin ✓ intact & no rash or infectionHEENT ✓ EENT-XII grossly intactHeart ✓ no (m)Lungs ✓ clear, no wheeze or cracklesExtremities ✓ 5/5 edema, full ROM, strong fm muscles

Other abd - soft &amp; BS NT.

Evaluation of labs, tests, treatments, consults

9/04 Glucose 70 Hgb A1C 5.8 Lactic acid 5.3  
 BUN 20 Cr 1.2

**COPY****ASSESSMENT**

X-Vit A 4000 IU AAA qd x 3 mo

X ASA 81mg po qd x 3 mo

X Allopurinol 150mg po qd x 3 mo

X/L Allopurinol 300mg

X Sodium Bicarb 650mg t.i.d po t.i.d x 3 mo

X Imitrex 25mg t.i.d pm HS up to q 12h x 3 mo

X Vasotec 5mg po B.i.d x 3 mo

X Cim. 6mg po t.i.d pm x 3 mo

X Singular 10mg po qd po qd x 3 mo.

**PLAN**

## Medications

X Flexeril 10mg po q 12h pm x 3 mo NTA

X O/C Indocin.

X Elavil 0.4mg po c HS x 3 mo NTA

X O/C Glucophage 850mg po t.i.d.

X Glucophage 850mg po t.i.d B.i.d x 3 mo

X Glyburide 10mg po qd x 3 mo

Labs /U/A to lab (hr Kidney, stones)

Treatments Do Hgb A1c prior to CC V in 3/05.

/ACV r 1x / mo x 3 mo.

## Consults

/ 4 ch 1 fat 2000 cal ADA  
Diet / to potato products Snack @ HS nutrt+fruit x 3 mo  
Special Needs

## Other

Cleared for transfer HSCR completed.

e col 2/05

## EDUCATION AND COUNSELING

Describes long term effects of diet, impact  
of dietary compliance & med compliance

Return to Clinic 90 days

Other

Signature/Title

Update Problem sheet

DOC XXX

HSCR

Date

12/3/04

Noted 12/3/04 w/m 1305 24, / by H over 1500

## LABORATORY REPORT

CLIENT
PROBATE: 03-00171-HG-KSC
RE: PBO 02-HOD-15
98-902 MOONALUH HWY.
ELIDA, HI 96701



650 IWILEI ROAD, SUITE 300  
HONOLULU, HI 96817 • TELEPHONE 589-5100

DATE OF BIRTH	SEX

PATIENT INFORMATION	
NAME: AHOLELEI, STAR	AGE: 62
ADDRESS: 242 YUEN, C.	HCSP #: A0146949
PT. TEL #: 0	

DATE COLLECTED	DATE RECEIVED	DATE REPORTED	ACCESSION NUMBER
02/06/2005 06:13:55	02/06/2005	02/06/2005 21:04	76006256 PAGE 1

SPECIMEN: NON-FASTING

TESTS	RESULTS	REFERENCE VALUES
Urinalysis - Complete		
Color	YELLOW	
Appearance	CLEAR	
Specific Gravity	1.020	1.005-1.030
pH	6.0	5-7.5
Protein	NEG	NEGATIVE
Glucose	NEG	NEGATIVE
Ketones	NEG	NEGATIVE
Urobilinogen	0.8	0.1-1.0
Bile Pigments	NEG	NEGATIVE
Blood	NEG	NEGATIVE
Leukocyte Esterase	NEG	NEGATIVE
Nitrite	NEG	NEGATIVE
Microscopic		

0-2 WBC/HPF

0-2 RBC/HPF

0-2 BACTERIA

CALCIUM OXALATE CRYSTALS PRESENT

NON-FASTING SPECIMEN

\*\*\* FINAL REPORT \*\*\*

1/18/05

## MULTIDISCIPLINARY PROGRESS NOTES

NAME: Aholelei, Star

DATE	TIME	LAB DRAWN FOR:
2-8-05		Hgb A1C
2-10-05		MD CLINIC/DR. C. Green CRNP 3mo. cc, Flu WT: 208" HT: 5'8" BP 108/78 D.M. Asthma R: 16 P: 76 CHRONIC CARE CLINIC Age 42 ♂ Flu need for INH ♂ PHYSICAL EXAM
	10am	Pmth
		Type II D.M. Chronic Sinusitis Asthma Assaulted 10/03 - fx jaw. Meds - F/T max q pm. Cerebazine 250mg qd Flestitil 16mg po qpm. Buflomed 7pm ASA 81mg po qd QUAR 50mg + puff BID Vit A + D 1000 (rash on arms + body) Singulair 10mg po qd Glipizide 10mg po qd OTM 4mg TID qpm Vasotec 5mg + po BID Sodium Bicarb 650mg 2 tabs TID Allopurinol 300mg 1/2 tab po qd Imitrex 25mg po q 10 HA Max 8/day. allergies - NKAD non-smoker Level II. See Paulee board 1/05 cmt

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETYNAME: Aholelei, Star

## MULTIDISCIPLINARY PROGRESS NOTES

SSN: \_\_\_\_\_

DOB: \_\_\_\_\_

DATE	TIME	
2/10/05		cont
		5. "010 of still experiencing spasms in brain. The necessary recommended medications for this: or see P.E. form
		A. Spasms in brain jaw pain & numbness Tylenol DM stable Asthma - stable Kidney stones Joint - stable.
		P- Consult w/ Optometry SOS SURP Flu w/ Dr. Stansbarger (due for 3mos & 1/4) Home or QR, Baumenschart review Please get eye w/ form Microsurgery report Duong no plan w/ eye care done 8/14, succ w/ other odes.
2/10/05	10:00 AM	for (10) no need for flu shot (10)
2/10/05	10:20	Appt made w/ Dr. Nakamoto p/ reqt of SURP approval - 5/1/05 0900 J. Callahan

Facility WCF

Chronic Care Clinic Initial Visit Flu	Name <u>Aholelei, Star</u>
Date <u>2/10/05</u> Time <u>10 AM</u>	SSN _____
	Diagnosis <u>D.H. Asthma, gout</u> <u>Kidney stones</u>

SUBJECTIVE DATA

## Complaints/Comments

allotmed

uses inhaler 1-2x/day, had some breathing

## History

## Family History

## Allergies

## Immunizations

Smoker

 N

How many packs per day?

How many years?

## Current Medications

see MAR

OBJECTIVE DATA

Vital Signs HR 51'8" WT 208 BP 108/78 P 76 R 16 T

Skin

HEENT

Heart

Lungs

Extremities

Other

abd - soft &amp; P.S. NT.

Evaluation of labs, tests, treatments, consults

Hgb A, C 6.1

Explain - walking 2-3 weeks n/o.

DOC 2006

ASSESSMENT

Type II DM - stable

Asthma - <sup>fever</sup> stable

Kidney stones - stable

jaw pain. Spots in brain - being followed.

PLAN	Isomax 14 mg po qpm Flexirol 10 mg q pm ASA 81 mg po qd	x 3 mo
Medications	Vit A + D oral AAD qd #3000 units/mo. Metformin 850 mg po bid Singulair 10 mg po qd	
	Glipizide 10 mg po qd CTM 4 mg po qd Viosterol 5 mg po BID	
Labs	lipid profile, LFT's	Sodium Bicarb 650 mg p tabs qm
Treatments	Uric acid 1 x /mo x 3 mo. (Allopurinol 300 mg) movement therapy	x 3 mo
Consults	Optometry 5/05. Dr. Strasburger 3 tabs Flu- 2000 cal ADA	Dr. Bauman C.R. 2005
Diet	↓ cholesterol fat diet, ↓ <sup>arachidic</sup> <del>potassium</del> , no potato diet Special Needs	↓ <sup>arachidic</sup> <del>potassium</del> x 3 mo.
Other	meat fruit at HS	x 3 mo.
	5/9/05 Cerv 5/05	5/11/05

EDUCATION AND COUNSELING

Exercise regular exercise + balance diet

Return to Clinic 90 days  Other \_\_\_\_\_Signature/TITLE Dr. Green MD

Update: Problem sheet \_\_\_\_\_ ESCR \_\_\_\_\_

Date 21/10/05

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETYFACILITY: WCFNAME: Oholelei, Star

SSN:

DOB:

URINALYSIS REPORTCOLOR: very light yellowAPPEARANCE: clearLEUKOCYTES: 2g (NEGATIVE)NITRITE: 2g (NEGATIVE)UROBILINOGEN: 0.2 (0.1-1.0)PROTEIN: 2g (NEGATIVE)pH: 5.0 (5-7.5)BLOOD: 2g (NEGATIVE)SPECIFIC GRAVITY: 1.005 (1.003-1.030)KETONE: 2g (NEGATIVE)BILIRUBIN: 2g (NEGATIVE)GLUCOSE: 2g (NEGATIVE)McCallister  
TESTER'S SIGNATURE2/10/05  
DATELeinen NP  
PHYSICIAN'S SIGNATURE2/10/05  
DATE

DATE	TIME	PLAN
3/11/05	10:30	<p>Drop In</p> <p>S - C/o (2) lower back pain &amp; 2 HBS.</p> <p>O - T 97° P 84 R 16 BP 110/68</p> <p>Hx kidney stone - Pain 0</p> <p>Flank - P - 4/1</p> <p>A - See UA result</p> <p>MMI. to eval. <i>After</i></p> <p>C 3/11/05</p>
3/11/05		<p>PROB Recurrent kidney stone</p> <p>P - HCT 25 g/dL 3 mo. (↓ stone form by 50% ↓ T Catt excretion) <i>Baumann</i></p> <p>Please discuss this new med w/ patient per GK <i>MB</i></p>
3/11/05	11:00	<i>Scilthman</i>
3/13/05	14:20	<p><b>NURSE STICK CALL</b></p> <p>S: my back is still so - not sure if its kidney now - in the lower left - think I pulled it the other day mopping</p> <p>O: able to flex forward = 45° - lower left side of muscle tight - 1/2 minimal pain upon tipping - greater w/ pressure. Denies blood in urine</p> <p>A: alt in comfort not possible back strain</p> <p>P: Issued #30 - 800mg smtria (Rx paid for 3/7/05) off work today - light duty next 3 days - etc per <i>Scilthman</i></p>
3/15/05	18:00	<p>Drop In</p> <p>S - "Feel like I'm going to pass out"</p> <p>O - T 97° P 100 R 18 BP 144/82 gbs 136</p> <p>Throat - no c/s</p> <p>Timp - CTA</p> <p>A - fatigue / dizzy</p> <p>P - Bedrest &amp; no. <i>Abell</i></p>

STATE OF HAWAII  
DEPARTMENT OF PUBLIC SAFETYFACILITY: Aholelei, StanNAME: Aholelei, Stan

SSN: \_\_\_\_\_

DOB: \_\_\_\_\_

URINALYSIS REPORTCOLOR: clear yellowAPPEARANCE: clearLEUKOCYTES: (-) (NEGATIVE)NITRITE: (-) (NEGATIVE)UROBILINOGEN: normal (0.1-1.0)PROTEIN: (-) (NEGATIVE)pH: 6.5 (5-7.5)BLOOD: (-) (NEGATIVE)SPECIFIC GRAVITY: 1.015 (1.003-1.030)KEYTONES: (-) (NEGATIVE)BILIRUBIN: (-) (NEGATIVE)GLUCOSE: (-) (NEGATIVE)TESTER'S SIGNATURE: W. K. K. K.DATE: 3/11/05PHYSICIAN'S SIGNATURE: K. B.DATE: 3/11/05

## MULTIDISCIPLINARY PROGRESS NOTES

NAME: Aholelei, Star

DATE	TIME	- CON't. -
3-30-05		A- Asthma Plan up at NTC. P- Notified Dr. Sardana i mod: Ventolin inh. 2 puffs TID PRN x 3 mos. RTC PRN <del>Dr. RN -</del>
4-1-05 0840		MD CLINIC/DR. R. Baudman F/u
		WT: 210 HT: 5'8 1/2" Bp 130/82 R: 20 P: 80
		PROB. DM c kidney disease ② Chronic Kidney Stones - Catt oxalate ③ Asthma ④ s/p face assault c fractures S no hx gout - on Birol & allopurinol for kidney stones; old note says Catt oxalate; On Singulair; uses albuterol q 4h !! worse in rain; nocturia x 1; wt. now stable but w/ past up to nearly 300; % ④ side episodic numbness had pt MRI
		O- Lungs clear Heart nl neck neg Abd neg Legs & edema DPs 1+ / 1+
		A - DM c nephropathy Recurrent kidney stones Asthma
		P- Repeat urine for microalbumin